

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 98 DEC -3 PM 4:25 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P97000066834					
1. Corporation Name The Up-Tick, Inc.					
Principal Place of Business 411 East Atlantic Ave. #6 Delray Beach, FL, 33483			Mailing Address 411 E. Atlantic Ave. Delray Beach, FL, 33483		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable The Up-Tick, Inc. Suite, Apt. #, etc. #6		3. New Mailing Office Address, If Applicable 411 E. Atlantic Ave. Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 7/31/97	
City & State Delray Beach Florida		City & State Zip		5. FEI Number 65-0775522	
Zip USA		Country USA		6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
1	2	3	4	5	6
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
President	Thomas L. Distefano III	2898 NW 26th Ct.	Boca Raton, FL		
Chairman		Boca Raton FL 33434	33434		
Vice Pres	Christopher L. Monteleone	590 Jefferson Dr.	Deerfield Beach, FL		
Secretary		#104	33412		
REINSTATEMENT					
TS 98 12/7/98					
3000002708159 - C					
-12/09/98--01115--014					
****758.75 ****758.75					
8. Name and Address of Current Registered Agent Thomas L. Distefano III 2898 NW 26th Ct. Boca Raton, FL 33434			9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent T.L. Distefano III Date 11-18-98 REGISTERED AGENT MUST SIGN					
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☐ (See other side for information on intangible tax.)					
12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
SIGNATURE: T.L. Distefano III Date 11-18-98 (561)362-0507 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #					

C12E040 (1/98)